B1 (Offici@2000-08-09430 Doc 1 Filed 01/04/08 Entered 01/04/08 11:17:12 Desc Main Page 1 of 43 United States Bankruptey Court Northern DISTRICT OF Illinois Name of Debtor Voluntary Petition Vary Name of Joint Debtor (Spouse) All Other Names used by the Debtor in the last 8 years All Other Names used by the Joint Debtor in the last 8 years Last four digits of Social-Security/Complete EIN or other Tax-I.D. No. (if more than Last four digits of Social-Security/Complete EIN or other Tax-I.D. No. (if more than one, state all): Street Address of Debtor (No. and Street, City, and State): Street Address of Joint Debtor (No. and Street, City, and State): 14813 maplewood two Harvey IL 60426 ZIP CODE County of Residence or of the Principal Place of Business: ZIP CODE County of Residence or of the Principal Place of Business: Mailing Address of Debtor (if different from street address): Mailing Address of Joint Debtor (if different from street address): ZIP CODE Location of Principal Assets of Business Debtor (if different from street address above): ZIP CODE Type of Debtor ZIP CODE Nature of Business (Form of Organization) Chapter of Bankruptcy Code Under Which (Check one box.) (Check one box.) the Petition is Filed (Check one box.) Health Care Business Individual (includes Joint Debtors) Chapter 7 Single Asset Real Estate as defined in Chapter 15 Petition for See Exhibit D on page 2 of this form. Chapter 9 Recognition of a Foreign 11 U.S.C. § 101(51B) Corporation (includes LLC and LLP) Chapter 11 Railroad Main Proceeding Partnership Chapter 12 Stockbroker Chapter 15 Petition for Other (If debtor is not one of the above entities, Chapter 13 Recognition of a Foreign Commodity Broker check this box and state type of entity below.) Nonmain Proceeding Clearing Bank Other Nature of Debts (Check one box.) Tax-Exempt Entity (Check box, if applicable.) Debts are primarily consumer Debts are primarily debts, defined in 11 U.S.C. Debtor is a tax-exempt organization business debts. § 101(8) as "incurred by an under Title 26 of the United States individual primarily for a Code (the Internal Revenue Code). personal, family, or house-Filing Fee (Check one box.) hold purpose." Chapter 11 Debtors Full Filing Fee attached. Check one box: Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). amable to pay fee except in installments. Rule 1006(b). See Official Form 3A. Check if: Filing Fee waiver requested (applicable to chapter 7 individuals only). Must Debtor's aggregate noncontingent liquidated debts (excluding debts owed to attach signed application for the court's consideration. See Official Form 3B. insiders or affiliates) are less than \$2,190,000. Check all applicable boxes: A plan is being filed with this petition. Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b) Statistical/Administrative Information Debtor estimates that funds will be available for distribution to unsecured creditors. THIS SPACE IS FOR Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for COURT USE ONLY UNITED NITED STATES BANKRUPTCY COUR NORTHERN DISTRICT OF ILLINOIS Estimated Number of Creditors L 47 1.49 50-99 П 100-199 200-999 J 1,000-5.001-10,001-25.001-50,001-5.000 Over 10,000 25,000 50,000 100,000 100,000 Estimated Assets П \$50,001 to \$0 to \$100,001 to \$500,001 \$1,000,001 \$50,000 \$10,000,001 \$50,000,001 \$100,000 \$100,000,001 More the S1 billion \$500,000 to \$1 \$500,000,001 to \$10 to \$50 to \$100 to \$500 million to \$1 billion million million Estimated Liabilities million million \$50,001 to \$0 to \$100,001 to \$500,001 \$1,000,001 \$10,000,001 \$50,000 \$50,000,001 \$100,000 \$100,000,001 \$500,000 to \$1 \$500,000,001 More than to \$10 to \$50 to \$100 to \$500 million to \$1 billion million \$1 billion million million million

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Volunters Perfo	Page 2 of 43	
Voluntary Petition (This page must be completed and filed in every case.)	Name of Debtor(s).	Page 2
All Prior Bankruptcy Cases Filed Within Last 8	Years (If more than two, attach additional sh	seet )
Where Filed Location	Case Number:	Date Filed
Where Filed	Case Number.	Date Filed
Pending Bankruptcy Case Filed by any Spouse, Partner, or Af	filiate of this Debtor (If more than one, attac	h additional sheet )
	Case Number:	Date Filed.
District	Relationship:	Index
Exhibit A		Judge <sup>.</sup>
(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  Exhibit A is attached and made a part of this petition.	I, the attorney for the petitioner named in have informed the petitioner that [he or sl 12, or 13 of title 11. United States C available under each such chapter 1 furth debtor the notice required by 11 U S C § 3	otor is an individual ly consumer debts.)  the foregoing petition, declare that I nel may proceed under chapter 7, 11, ode, and have explained the relief for certify that I have delivered to the 842(b)
	X Signature of Attorney for Debter Signature of Attorney for Debter(s)	or(s) (Date)
Exhibit	С	
Does the debtor own or have possession of any property that poses or is alleged to pose	o threat of in.	
Yes, and Exhibit C is attached and made a part of this petition	a urreat of imminent and identifiable harm to	public health or safety?
No		
<b>№</b> No		
Exhibit (To be completed by every individual debtor. If a joint noticion is at		
(To be completed by every individual debtor. If a joint petition is filed	, each spouse must complete and att	ach a separate Exhibit D.)
<ul> <li>Exhibit D completed and signed by the debtor is attached and r</li> </ul>	nade a part of this petition.	}
If this is a joint petition:		
Exhibit D also completed and signed by the initial date.		ļ
☐ Exhibit D also completed and signed by the joint debtor is attac	hed and made a part of this petition.	
Information Regarding th	e Debtor Venue	
Debtor has been domiciled or has had a residence, principal place of the preceding the date of this petition or for a longer part of such 180 days	pusiness, or principal assets in this District for than in any other District.	r 180 days immediately
There is a bankruptcy case concerning debtor's affiliate, general partners		1
Debtor is a debtor in a foreign proceeding and has its principal.	0.1	
Debtor is a debtor in a foreign proceeding and has its principal place of has no principal place of business or assets in the United States but is this District, or the interests of the parties will be served in regard to the	or business or principal assets in the United S a defendant in an action or proceeding [in a fi e relief sought in this District	tates in this District, or ederal or state court] in
Certification by a Debtor Who Resides as a	Tenant of Residential Property	
(Спеск ан аррисаы	e boxes.)	
Landlord has a judgment against the debtor for possession of debtor	s residence (If box checked, complete the fo	ollowing )
<del>,</del>	Name of landlord that obtained judgment)	
	dress of landlord)	
· ·	· = = /	f f
		{
Debtor claims that under applicable nonbankruptcy law, there are circ entire monetary default that gave rise to the judgment for possession.	cumstances under which the debtor would be after the judgment for personner.	permitted to cure the
<ul> <li>Debtor claims that under applicable nonbankruptcy law, there are circ entire monetary default that gave rise to the judgment for possession,</li> <li>Debtor has included with this petition the deposit with the court of an filing of the petition.</li> </ul>	arter the judgment for possession was entered	i, and

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Voluntary Petition	Page 3
(This page must be completed and filed in every case.)	Name of Debtor(s):
Sic	gnatures
Signature(s) of Debtor(s) (Individual/Joint)	
I declare under penalty of parties at a state of	Signature of a Foreign Representative
I declare under penalty of perjury that the information provided in this petition is tru-	I declare under penalty of perjury that the information provided in this petition is
[If petitioner is an individual whose debts are primarily consumer debts and ha	The foreign representative of a debiot in a fact.
	o The this petition
	(Check only one box.)
If no attorney represents me and no bankruptor notition	I request relief in accordance with chapter 15 of title 11. United States Code Certified copies of the documents required to the 11. United States Code
have obtained and read the notice required by 11 U.S.C. § 342(b).	Certified copies of the documents required by 11 U S C \$ 1515 are attached
I request relief in accordance with the chapter of title 11. United States Code, specified in this petition.	Pursuant to 11 U.S.C. 8 1511   I request relief in any 1
specified in this petition.	
x Made	order granting recognition of the foreign main proceeding is attached
Signature of Debit	X
V	(Signature of Foreign Representative)
X Cincal Classical Control Con	
Signature of Joint Debtor 708-333-2756	(Printed Name of Foreign Representative)
Telephone Number (if not represented by attorney)	:
Date	Date
Signature of Attorney*	
	Signature of Non-Attorney Bankruptcy Petition Preparer
Signature of Attorney for Debtor(s)	I declare under penalty of persons that (1) t
	I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer defined in 11 U.S.C. § 110, (2) I prepared this document for compensation and har provided the dehior with a copy of this document.
Printed Name of Attorney for Debtor(s)	provided the debtor with a copy of this document and the notices and information
Firm Name	guidelines have been promulated pursuant (1), and 342(b), and, (3) if rules of
Address	fee for services chargeable by bankruptcy petition preparers, I have given the debte
Address	notice of the maximum amount before preparing any document for filing for a debti
	or accepting any fee from the debtor, as required in that section. Official Form 19
Telephone Number	Printed Name and title, if any, of Bankruptcy Petition Preparer
Date	
	Social-Security number (If the bankruptcy petition preparer is not an individual
n a case in which § 707(b)(4)(D) applies, this signature also constitutes a	
rtification that the attorney has no knowledge after an inquiry that the information the schedules is incorrect	(Required by 11 U S C § 110)
	Address
Signature of Debtor (Corporation/Partnership)	
eclare under penalty of perjury that the information provided in this petition is true	
and that I have occur authorized to the this petition on held to a	X Signature
otor the dis penden of behalf of the	· · · · · · · · · · · · · · · · · · ·
e debtor requests the relief in accordance with the chapter of title 11. United States	Date
	C
ł	Signature of bankruptcy petition preparer or officer, principal, responsible person, or
Signature of Authorized Individual	r was thrown distribution is provided above
	Names and Social-Security numbers of all other individuals who prepared or assisted
	The same decembers united the name that net then pro-
Title of Authorized Individual	ndividual.
Date 1	f more than one person prepared this document, attach additional sheets conforming
Date t	o the appropriate official form for each person.
A	bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or 11 U.S.C. 8 110-18 115 C. 8 150
	TERROR OF THE STATE OF THE STAT

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Official Form 1, Exhibit D (10/06)

## UNITED STATES BANKRUPTCY COURT

	Northern	District of	Illinois
In re Mary Debtor(s)	Awe	(	Case No(if known)

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

I. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.

2. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.

Official Form	1,	Exh.	D	(10/06) –	Cont.
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3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]
If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.
□ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); □ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); □ Active military duty in a military combat zone.
5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: $May$ Date: $01-04-08$

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B6 Summary (Official Form 6 - Summary) (12/07)

United	States	Bankruptcy	/ Court
--------	--------	------------	---------

		Northern	District Of _	<u>Illinois</u>	
In re Many	Awe Debtor	······································		Case No.	
· ·				Chapter	

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Y	1	<b>s</b> 0	•	
B - Personal Property	Y	3	s 1500		
C - Property Claimed as Exempt	Y	1			
D - Creditors Holding Secured Claims	Y	0		\$0	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Y	0		2 ()	
F - Creditors Holding Unsecured Nonpriority Claims	Y	11		s 36745	
G - Executory Contracts and Unexpired Leases	Y	1			
H - Codebtors	Y	1	`		
- Current Income of Individual Debtor(s)	Y	1			\$1200
- Current Expenditures of Individual Debtors(s)	Y	1			s 1435
то	TAL	20	\$ 1500	\$36745	

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Form 6 - Statistical Summary (12/07)

## United States Bankruptcy Court

Λ. Λ	Northern	District Of Illinois
In re Wany Awe Debtor		Case No
`		Chapter

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$0
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$0
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	80
Student Loan Obligations (from Schedule F)	\$
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$0
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$0
TOTAL	\$

#### State the following:

Average Income (from Schedule I, Line 16)	\$1200
Average Expenses (from Schedule J, Line 18)	\$ 1435
Current Monthly Income (from Form 22A Line 12; <b>OR</b> . Form 22B Line 11; <b>OR</b> , Form 22C Line 20)	\$0

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$0
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$0	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0
4. Total from Schedule F		\$36745
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$36745

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B6A (Official Form 6A) (12/07)

In re	Many		Awe	,	
	ľ	ebtor			

Case No.
(If known)

### SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, YOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
N/A				

(Report also on Summary of Schedules.)

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Inre Mary Awe,	Case No.
Pebtor	(If known)

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1 Cash on hand.	V			
2 Checking, savings or other finan- cial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and home- stead associations, or credit unions, brokerage houses, or cooperatives.				
Security deposits with public utilities, telephone companies, land-lords, and others.	1			
Household goods and furnishings, including audio, video, and computer equipment		Sofer Bedroomset - householdgood		为500,00
5 Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles				
6 Wearing apparel				
7 Furs and jewelry				
8 Firearms and sports, photo- graphic, and other hobby equipment.	~			
9 Interests in insurance policies Name insurance company of each policy and itemize surrender or refund value of each.	~			
10 Annuities Itemize and name each issuer	1			
IT Interests in an education IRA as defined in 26 U S C § 530(b)(1) or under a qualified State tuntion plan as defined in 26 U S C § 529(b)(1). Give particulars (File separately the record(s) of any such interest(s). If U S C § 521(c).)				

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Inre Mary Awa,	Case No.
Debtor	(If known)

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12 Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	~			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.				
14 Interests in partnerships or joint ventures Itemize	1			
15 Government and corporate bonds and other negotiable and non-negotiable instruments.	1/			
16 Accounts receivable.	1			
17 Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars	1			
18 Other Inquidated debts owed to debtor including tax refunds. Give particulars				·
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property				
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	V			
21 Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each	V			
rate of each				

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Case No.
(lf known)

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, YORKT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
22 Patents, copyrights, and other intellectual property. Give particulars.	W			
23 Licenses, franchises, and other general intangibles. Give particulars.	V			
24 Customer lists or other compilations containing personally identifiable information (as defined in 11 U S C § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes				
25 Automobiles, trucks, trailers, and other vehicles and accessories.	V			
26 Boats, motors, and accessories	V			
27 Aircraft and accessories				
28 Office equipment, furnishings, and supplies.				
29 Machinery, fixtures, equipment and supplies used in business				
30 Inventory				
31. Animals				
32 Crops - growing or harvested Give particulars				
33 Farming equipment and implements.				
34 Farm supplies, chemicals, and feed.				
35 Other personal property of any kind not already listed. Itemize.				

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

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Inre Mary Awe,	Case No.
Debtor	(If known)

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions	to which debtor is entitl	led under:
(Check one box)		

- ☐ 11 U.S.C. § 522(b)(2) ☐ 11 U.S.C. § 522(b)(3)

Check if debtor	claims a	homestead	exemption	that exceed	s
\$136.875					

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Sofa Bedroomset Household good	735-5/12-1001 (b)	\$1500.00	\$\1500.00

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B6D (Official Form 6D) (12/07)				
In re Mary	Awe	,	Case No.	
T	Debtor			(If known)

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.			SOBJECT TO SIEN					
ACCOUNT NO.			VALUE \$					
			VALUE \$					
ACCOUNT №0								
			VALUE S					
continuation sheets			Subtotal ►  (Total of this page)		!		\$	\$
			Total ► (Use only on last page)				\$ (Report also on Summary of Schedules.)	\$ (If applicable, report also on Statistical Summary of Certain Liabilities and Related

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B6E (Official Form 6E) (12/07)

In re Many And Case No. (if known)

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

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FORM B6F - Cont. (10/89)

In re Mary	LAWE,
,	Debtor

Case No.	
	(If known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Collection for Midland credit Management				
CBCS P.O. Box 163250 Columbus OH 43216-3250							130
ACCOUNT NO.			Bill				
Aspen Payment Processing P.O. Box790215 St Louis MO 63179							200
ACCOUNT NO.			Bill				
Tribute Payment Processing P.O. Box 136 Newark NJ 07101							200
ACCOUNT NO.							
Suburban Emergency PHYS Group P.O. Box2729 Carol Stream IL 60132							425
ACCOUNT NO.			Bill				
Northland Group Inc P.O. Box 390846 Edina MN 55439							170

Total ➤ (Use only on last page of the completed Schedule E.)

(Report total also on Summary of Schedules)

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B6F (Official Form 6F) (12/07)

In re Mar	1 Awc,
T	Debtor

Case No.	
	(if known)

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. \$112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed," (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data ..

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Check this box if debtor has no	ciculior	s nording das	ecured claims to report on this schedi	JIC 1 .			
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO			Collection agency for SBC				
Encore Receivable Management Inc P.O. Box 3330 Olathe KS 66063-3330							666
ACCOUNT NO			Collection for Nicor Gas			<del> </del>	
Asset Acceptance LLC P.O. Box 2036 Warren MI 48090-2036					4444		543
ACCOUNT NO.			Collection for Oak Forest Hospital				
Linebarger Goggan Blair & Sampson LLC P.O. Box 06268 Chicago IL 60606							3892
ACCOUNT NO.			Medical Account				
Heart Care Centers of ILL P.O. Box 766 Bodford Park IL 60499							50
	L	L	<u> </u>	I	Sub	tota!➤	\$ 5151
continuation sheets attached		(Report a	(Use only on last page of the also on Summary of Schedules and, if appl Summary of Certain Liabil	icable, o	ed Sched n the Sta	tistical	\$

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B6F (Official Form 6F) (12/07) - Cont.

In re Mary	Auc,
•	Debtor

Case No.		
	(if known)	

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO			Medical Bill				
new Oaklawn Mr. Imaging 6240 W 95th St Oak Lawn IL 60453							2600
ACCOUNT NO			Bill			<b></b>	
Jeffry Curtin Do Palos Heights IL 60463							50
ACCOUNT NO.	<del> </del>		Medical Bill				
St Fansis Hospital 12935 S Gregory Blue Island IL 60406							250
ACCOUNT NO.			Medical bill				
Island National Group LLC P.O. Box 18009 Hauppauge NY 11788-8809							358
ACCOUNT NO.			Medical Bill				
Advocate South Suburban Hospital 22091 Network Place Chicago IL 60673							100
Sheet noofcontinuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				total➤	\$ 3358		
Total >- (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)				\$			

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B6F (Official Form 6F) (12/07) - Cont.

In re Many	Aws	,
	Debtor	

Case No.	
	(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO			Medical bill				
St Francis Hospital P.O. Box 2102 Bedford Park II. 60499-2102						:	300
ACCOUNT NO			Medical bill		<u> </u>		
Advocate Health Care 22091 Network Place Chicago IL 60673-1220							101
ACCOUNT NO.			Medical Bill				
Diversified Collection Services 900 S Highway Dr Suite 210 Fenton MO 63026							440
ACCOUNT NO			Collection for AR Imaging S.C.				
NCO Financial System 507 Prudentail Rd Horsham PA 19044							50
ACCOUNT NO			Medical bill				
Advocate South Suburban Hospital 17800 Kedzie Ave Hazelcrest IL 60429							6500
Sheet noof continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				total⊁	s 7391		
Total➤ (Use only on last page of the completed Schedule F) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)				\$			

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B6F (Official Form 6F) (12/07)

Case No.	
	(if known)

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed," (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data..

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F HUSBAND, WIFE, JOINT, OR COMMUNITY AMOUNT OF CREDITOR'S NAME. DATE CLAIM WAS UNLIQUIDATED CONTINGENT CODEBTOR MAILING ADDRESS INCURRED AND CLAIM DISPUTED INCLUDING ZIP CODE, CONSIDERATION FOR AND ACCOUNT NUMBER CLAIM. (See instructions above.) IF CLAIM IS SUBJECT TO SETOFF, SO STATE. Bill ACCOUNT NO. Fingerhut 150 P.O. Box 166 Newark NJ 07101 Bill ACCOUNT NO Consultant In Pathology 125 P.O. Box 9231 Michigan City In 46361 ACCOUNT NO. bill MidAmerica Cardiovascular Consultants 375 5009 West 95th Street Oaklawn Illinois 60453 collection for at&t ACCOUNT NO Southwest Credit system L.P. 225 5910 W Plano Parkway Suite 100 Plano Texas 75093-4638 Subtotal> \$875 continuation sheets attached (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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B6F (Official Form 6F) (12/07) - Cont.

Case No.	
	(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.  U.S Department of Education P.O. Box 530260 Atlanta Ga 30353	-		Loan				14000
ACCOUNT NO. United Healthcare Related Materials Ingenix P.O. Box 13216 Green Bay Wisconsin 54307-3216			Medical bill				200
ACCOUNT NO Suburban emergency Phys Group P.O. Box 2729 Carol Stream IL 60132			Medical Bill				450
ACCOUNT NO  Prevention P.O. Box7319 Red Oak IL 1A 51591			Bill			***************************************	20
ACCOUNT NO.  MCM Dept 12421 P.O. Box 1259 Oaks PA 19456	-		Bill				250
Sheet no of continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				total➤	s 14920		
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)				\$			

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B6F (Of	ficial Forn	n 6F) (12/07)	
In re	Mary	Awe	,
-		Debtor	

Case No.	((Clanava)
	(if known)

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY AMOUNT OF DATE CLAIM WAS CREDITOR'S NAME, UNLIQUIDATED CONTINGENT **CLAIM INCURRED AND** MAILING ADDRESS CODEBTOR DISPUTED CONSIDERATION FOR INCLUDING ZIP CODE, CLAIM. AND ACCOUNT NUMBER IF CLAIM IS SUBJECT TO (See instructions above.) SETOFF, SO STATE. Bill ACCOUNT NO. Guaranty bank Unknown P.O. Box 240200 Milwaukee Wisconsin 53224 Bill ACCOUNT NO. Heart Care Centers 150 P.O. Box766 Bedford Park IL 60499 collection agency for Oaklawn ACCOUNT NO Radiology Imaging Trustmark Recovery Services 500 541 Otis Bowen Drive Munster IN 46321 Collection for DirecTV Inc ACCOUNT NO NCO Financial System Inc. 400 507 Prudential Road Horsham PA 19044 s 1050 Subtotal> \$ continuation sheets attached (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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**B6F** (Official Form 6F) (12/07) - Cont.

In re May	Awe	
	Debtor	

Case No.		
	(if known)	

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO  NAFS 165 Lawrence Bell Dr Ste 100 P.O> Box 9027 Williamsville NY 14231			Collection for Providian Bank Genisis Financial				450
ACCOUNT NO.  Nicor Gas 1844 Ferry Road Naperville IL 60563	_		Bill				Unknown
ACCOUNT NO.  Chicago State University 9501 S King Drive Chicago IL 60628			Bill				Unknown
ACCOUNT NO  Harris 600 W Jackson Chicago IL 60661	•		Bill				Unknown
ACCOUNT NO  Cavalry Protfolio P.O. Box 27288 Tempe AZ 85282			collection agency for Sprint				900
Sheet noof continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  Total>  (Use only on last page of the completed Schedule F.)  (Report also on Summary of Schedules and, if applicable on the Statistical						\$ 1350 \$	

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In re Debtor

Case No.	
	(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data..

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY AMOUNT OF DATE CLAIM WAS CREDITOR'S NAME, UNLIQUIDATED CONTINGENT CODEBTOR CLAIM **INCURRED AND** MAILING ADDRESS DISPUTED CONSIDERATION FOR INCLUDING ZIP CODE, CLAIM. AND ACCOUNT NUMBER IF CLAIM IS SUBJECT TO (See instructions above.) SETOFF, SO STATE. Bill ACCOUNT NO Dependon Coll Serv Unknown 7627 W Lake St River Forest IL 60305 Bill ACCOUNT NO State Collection unknown P.O. Box 6250 Madison WI 53701 Medical Bill ACCOUNT NO Midwest Diagnostic Pathology 45 75 Remittance Dr Ste 3070 Chicago IL 60675 Collection for Columbia House CO ACCOUNT NO 125 NCO Financial System Inc. 507 Prudential Road Horsha PA 19044 \$170 Subtotal**>** continuation sheets attached (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data )

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B6F (Official Form 6F) (12/07) - Cont.

Case No.	
	(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO			Bill				
John H Stoger Jr. Hospital of Cook County P.O. Box 70121 Chicago IL 60673							45
ACCOUNT NO.			Bill				
Midnight Velvet 1112 7th Ave Monroe WI 53566-1364							130
ACCOUNT NO			Medical Bill				
Suburban Emergency Phys P.O. Box 2729 Carol Stream JL 60132							450
ACCOUNT NO			Bill				
Fingerhut Direct Marketing Inc. 6250 Ridgewood Road St Cloud MN 56303							200
ACCOUNT NO		************************************	Bill				
At&T P.O. Box Aurora IL 60507							230
Sheet no of continuation sheets atta to Schedule of Creditors Holding Unsecure Nonpriority Claims			<u></u>		Sub	total≯	\$ 1055
		(Report	(Use only on last page of the also on Summary of Schedules and, if appl Summary of Certain Liabil	icable oi	ed Sched in the Star	tistical	s

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FORM B6F - Cont. (10/89)

Case No.	
	(If I mayor)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTOR	HUSBAND, WIFE, JOHNT, OR COMMUNITY	DATE CLAIM WAS INCURRED, AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Collection agency				
NCO Financial Systems Inc. P.O. Box 15630 Dept 99 Wilmington De 19850							300
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							

Total ➤ (Use only on last page of the completed Schedule E.) (Report total also on Summary of Schedules)

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B6G (Official Form 6G	(12/07)			
Inre Mary L	+w=		Case No.	
Debto	r	<del></del>	Case No(if know	
•			(II KHOV	vn)
SCHEDULE	G - EXI	ECUTORY CON	NTRACTS AND UNEXPIRE	D LEASES
lessee of a lease. Provi a minor child is a party or guardian, such as "A Fed. R. Bankr. P. 10076	of debtor's I ide the name to one of the A.B., a minor (m).	nterest in contract, i.e., " es and complete mailing ne leases or contracts, sta r child, by John Doe, gua	nexpired leases of real or personal property. Purchaser," "Agent," etc. State whether debt addresses of all other parties to each lease or te the child's initials and the name and addres ridian." Do not disclose the child's name. See,	or is the lessor or contract described. If
Check this box if debto	r has no exe	cutory contracts or unex	pired leases.	
NAME AND INCLUI OF OTHER PARTIES	DING ZIP (	CODE,	DESCRIPTION OF CONTRACT OF NATURE OF DEBTOR'S INTER WHETHER LEASE IS FOR NONI REAL PROPERTY. STATE OF NUMBER OF ANY GOVERNMEN	EST. STATE RESIDENTIAL ONTRACT
	·····			
		·····		

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B6H (Official Form 6H) (12/07)	Document	Page 27 of 43	
Inre May Auz	7	Case No.	
Debtor			(if known)
	COTTENTION OF	CODEDTODO	

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
<u>,                                      </u>	

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Document

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B6I (Official Form 6I) (12/07)	Boodinent	1 age 20 01 40	
Inre Mary Awe		Case No.	
Debtor			(if known)

## SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

Debtor's Marital	DEPENDE	DENTS OF DEBTOR AND SPOUSE					
Status: S	RELATIONSHIP(S):	IIP(S):					
Employment:	DEBTOR	SPOUSE					
Occupation	provider						
Name of Employer	• • • • • • • • • • • • • • • • • • •						
How long employe	Self employee		<del></del>				
Address of Employ	er julyes						
riourous er zampre,	same address						
	of average or projected monthly income at time	DEBTOR	SPOUSE				
case f	iled)	-1200	_				
Manghly and a con-	and colors and assemble to the	s1200	<u> </u>				
(Prorate if not pa	ges, salary, and commissions	<b>\$</b> 0	c				
Estimate monthly	• •	\$ <u>U</u>					
commac monuny	overance						
SUBTOTAL		a1200	_				
		<u>\$1200</u>	<u>s</u>				
LESS PAYROLL	DEDUCTIONS						
a. Payroll taxes an	d social security	\$0	<u>\$</u>				
b. Insurance		\$ 0	<u></u>				
c. Union dues		\$ 0	S				
d. Other (Specify)	:	\$ 0	2				
SUBTOTAL OF P	AYROLL DEDUCTIONS	\$0	\$				
TOTAL NET MO	NTHLY TAKE HOME PAY	s1200					
Regular income fro	om operation of business or profession or farm	<b>\$</b> 0	\$				
(Attach detailed:		*	<del></del>				
Income from real p	roperty	\$0	\$				
Interest and divide	nds	\$ <u>0</u>	\$				
	ance or support payments payable to the debtor for	<b>s</b> 0	\$				
	or that of dependents listed above	-					
	government assistance	^					
(Specify):		\$ <u>0</u>	s				
Pension or retiren		\$0	\$				
. Other monthly inc	come	\$ <u>0</u>					
(Specify)		3 -	<b>9</b>				
SUBTOTAL OF	LINES 7 THROUGH 13	s <u>1200</u>	<u> </u>				
AVERAGE MON	TTHLY INCOME (Add amounts on lines 6 and 14)	s <u>1200</u>	S				
	,	6 100					
COMBINED AV	ERAGE MONTHLY INCOME: (Combine column	\$ <u>120</u>					
als from line 15)		(Report also on Sumr	mary of Schedules and, if applicable,				

on Statistical Summary of Certain Liabilities and Related Data)

<sup>17.</sup> Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

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B6J (Official Form 6J) (12/07)

In re	Mary	Awe,	
		Debtor	

Case No.	
	(if known)

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form22A or 22C.

Rent or home mortgage payment (include lot rented for mobile home)	\$ <u>975</u>
a. Are real estate taxes included?  b. Is property insurance included?  Yes No  No	
. Utilities: a. Electricity and heating fuel	<b>s</b> 90
b. Water and sewer	s <u>0</u>
c. Telephone	\$ <u>0</u>
d. Other	\$ <u>0</u>
Home maintenance (repairs and upkeep)	\$ <u>0</u>
Food	s <u>200</u>
Clothing	s <u>25</u>
. Laundry and dry cleaning	s <u>10</u>
. Medical and dental expenses	s <u>75</u>
Transportation (not including car payments)	\$ <u>0</u>
Recreation, clubs and entertainment, newspapers, magazines, etc.	s <u>0</u>
0.Charitable contributions	s <u>0</u>
1.Insurance (not deducted from wages or included in home mortgage payments)	_
a. Homeowner's or renter's	s <u>0</u>
b. Life	<b>s</b> <u>0</u>
c. Health	\$ <u>0</u>
d. Auto	s <u>0</u>
e. Other	\$ <u>0</u>
Taxes (not deducted from wages or included in home mortgage payments)  Specify)	\$ <u>0</u>
3. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$ <u>0</u>
b. Other	\$ <u>0</u>
c. Other	\$ <u>0</u>
14. Alimony, maintenance, and support paid to others	
15. Payments for support of additional dependents not living at your home	
6. Regular expenses from operation of business, profession, or farm (attach detailed statement)	2 <u>0</u>
7. Other	\$ <u>0</u>
<ol> <li>AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)</li> </ol>	<u>\$1435</u>
9. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this	s document:

- a. Average monthly income from Line 15 of Schedule I
- b. Average monthly expenses from Line 18 above
- c. Monthly net income (a. minus b.)

Document

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B6 Declaration (Official Form 6 - Declaration) (12/07)

(if known)

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foreg	oing summary and schedules, consisting of sheets, and that they are true and correct to the best of
my knowledge, information, and belief	<u>k</u>
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Λ <sub>Λ</sub> \
Date 01-04-08	Signature: Wash
-	Debtor
Date	Signature:
	(Joint Debtor, if any)
	[If joint case, both spouses must sign ]
	NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)
I declare under penalty of perjury that: (1) I am a bankruptcy peti the debtor with a copy of this document and the notices and informa	tion preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided tion required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been for services chargeable by bankruptcy petition preparers. I have given the debtor notice of the maximum
Printed or Typed Name and Title, if any,	Social Security No.
of Bankruptcy Petition Preparer	(Required by 11 U.S.C. § 110.)
If the bankruptcy petition preparer is not an individual, state the na- who signs this document.	me, (title (if any), address, and social security number of the officer, principal, responsible person, or partner
Address	
v	
X Signature of Bankruptcy Petition Preparer	Date
Names and Social Security numbers of all other individuals who pre	pared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual
If more than one person prepared this document, attach additional s	igned sheets conforming to the appropriate Official Form for each person.
A bankrupicy petition preparer's failure to comply with the provisions of the $18 \cup S \subset \$$ 156.	tile 11 and the Federal Rules of Bankrupicy Procedure may result in fines or imprisonment or both. 11 USC § 110,
DECLARATION UNDER PENALTY O	F PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP
partnership of the	ent or other officer or an authorized agent of the corporation or a member or an authorized agent of the [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have eets (Total shown on summary page plus I), and that they are true and correct to the best of my
Date	
	Signature.
	[Print or type name of individual signing on behalf of debtor ]
f.4n individual signing on behalf of a partnership or corporation	
Penalty for making a false statement or concealing property: Fu	ne of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571

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(Official Form 6	1)(12/07),	· ·	
In re Mar	/1	Case No.	
	Debtor		(if known)

### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

Debtor's Marital	DEPENDENTS OF DEBTOR AND SPOUSE			
Status: S	RELATIONSHIP(S):		AGE(S):	
Employment:	DEBTOR		SPOUSE	
Occupation	Drovider			
Name of Employer				
How long employe	self employee			
Address of Employ	illyrs er Same address			
,	of average or projected monthly income at time	DEBTOR	SPOUSE	
case t	īled)	s1200	\$	
1. Monthly gross wa	ges, salary, and commissions	ψ <u>1400</u>	Ψ	
(Prorate if not page		<u>\$ 0                                   </u>	\$	
2. Estimate monthly	overtime			
3. SUBTOTAL		\$1200	\$	
4. LESS PAYROLL	DEDUCTIONS			
a. Payroll taxes at	nd social security	\$0	\$	
b. Insurance		\$ o \$ o	2	
c. Union dues d. Other (Specify):		\$ 0	\$ \$	
d. Other (specify	)·		<u> </u>	
5. SUBTOTAL OF PAYROLL DEDUCTIONS		<u>s_0</u>	\$	
6. TOTAL NET MONTHLY TAKE HOME PAY		<u>\$1200</u>	\$	
7. Regular income from operation of business or profession or farm		\$0	\$	
(Attach detailed statement)  8. Income from real property		\$ <u>0</u>	\$	
9. Interest and dividends		\$ 0	\$	
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above		\$ 0	\$	
	government assistance			
(Specify):		\$ <u>0</u>	\$	
12. Pension or retirement income		\$0	\$	
13. Other monthly income (Specify):		<b>s</b> 0	\$	
(Specify)	· · · · · · · · · · · · · · · · · · ·		Ψ	
14. SUBTOTAL OF LINES 7 THROUGH 13		<u>\$1200</u>	\$	
15. AVERAGE MOI	NTHLY INCOME (Add amounts on lines 6 and 14)	<u>\$1200</u>	\$	
6. COMBINED AVERAGE MONTHLY INCOME: (Combine column		\$ <u>1200</u>		
		(Report also on Summary	of Schedules and, if applicable,	

on Statistical Summary of Certain Liabilities and Related Data)

<sup>17.</sup> Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

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(inciai i oi in oo)	(#/O/) A	
In re Mary	Awe	,
	\Debtor	

Case No.		
	(if known)	

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form22A or 22C

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of ex	<b>\$</b> 975
1 Rent or home mortgage payment (include lot rented for mobile home)	\$ <u>715                                    </u>
a Are real estate taxes included? Yes No ✓ b Is property insurance included? Yes No ✓	
	\$90
2 Utilities a Electricity and heating fuel	\$ 0
b Water and sewer	\$ <u>0</u>
c Telephone	\$ <u>0</u>
d Other	\$ <u>0</u>
3 Home maintenance (repairs and upkeep)	\$ <del>0</del> \$ <del>2</del> 00
4 Food	\$ <u>250</u>
5 Clothing	\$ <u>25</u> \$ 10
6 Laundry and dry cleaning	\$ <del>10</del> \$ 75
7 Medical and dental expenses	\$ <u>7 5</u>
8 Transportation (not including car payments)	\$ <del>0</del>
9 Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ <u>0</u>
10 Charitable contributions	3 <u>U</u>
11 Insurance (not deducted from wages or included in home mortgage payments)	<b>s</b> 0
a Homeowner's or renter's	\$ <del>0</del>
b Life	\$ <del>0</del>
e Health	\$ <del>0</del>
d Auto	\$ <del>0</del>
e Other	30
12 Taxes (not deducted from wages or included in home mortgage payments) (Specify)	s <u>0</u>
13 Installment payments (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	
a Auto	\$ <u>0</u>
b. Other	\$ <u>0</u>
c Other	\$ <u>0</u>
14 Alimony, maintenance, and support paid to others	\$ <u>0</u>
15 Payments for support of additional dependents not living at your home	s <u>0</u>
16 Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>
17 Other	\$ <u>0</u>
18 AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	<u>\$1435</u>
19 Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document	
20 STATEMENT OF MONTHLY NET INCOME	40.4.0
a Average monthly income from Line 15 of Schedule I	s 1200
b Average monthly expenses from Line 18 above	s 14 35
c. Monthly net income (a. minus b.)	<u>s - 235</u>

B7 (Official Form 7) (12/07)

#### UNITED STATES BANKRUPTCY COURT

		<b>N</b> Y4 <b>J</b>	DIOTRICT OF	
		Northern	DISTRICT OF _	Illinois
In re:_	Many	Awe	Case No	O(if known)
	1			
		STATEMEN	NT OF FINANCIA	L AFFAIRS
informa filed. A should affairs. child's	ormation for both ation for both sp An individual de provide the info To indicate pay	in spouses is combined. If the ouses whether or not a joint btor engaged in business as a rmation requested on this star ments, transfers and the like an, such as "A.B., a minor chemical star and the like an, such as "A.B., a minor chemical star and the like an, such as "A.B., a minor chemical star and the like and	e case is filed under chapte petition is filed, unless the a sole proprietor, partner, s atement concerning all suc to minor children, state the	i joint petition may file a single statement on which er 12 or chapter 13, a married debtor must furnish espouses are separated and a joint petition is not family farmer, or self-employed professional, hactivities as well as the individual's personal ne child's initials and the name and address of the n." Do not disclose the child's name. See, 11 U.S.C.
additio	omplete Questional space is need	ns 19 - 25. If the answer to	an applicable question is estion, use and attach a sep	e or have been in business, as defined below, also s "None," mark the box labeled "None." If parate sheet properly identified with the case name.
			DEFINITIONS	
the filin of the v self-em	ual debtor is "in ag of this bankru oting or equity s ployed full-time s in a trade, busi	business" for the purpose of ptcy case, any of the followisecurities of a corporation; a or part-time. An indivídual	this form if the debtor is one an officer, director, may partner, other than a limit debtor also may be "in but	if the debtor is a corporation or partnership. An or has been, within six years immediately preceding anaging executive, or owner of 5 percent or more ed partner, of a partnership; a sole proprietor or isiness" for the purpose of this form if the debtor applement income from the debtor's primary
5 percei	"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.			
	1. Income f	rom employment or opera	tion of business	
None	- Proceedings from operation of			
	AM	OUNT		SOURCE
200%	1 \$15	200.00		SolfEmp SolfEmp SolfEmp
2000	0 4/2	00.00		Solfang
2000	1 1/2	00.00		SolfEmpl

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

#### 3. Payments to creditors



#### Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF

DATES OF PAYMENTS AMOUNT PAID AMOUNT STILL OWING 2



b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF AMOUNT STILL OWING

TRANSFERS

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATE OF AND RELATIONSHIP TO DEBTOR

PAYMENT

AMOUNT PAID

AMOUNT STILL OWING 3

4. Suits and administrative proceedings, executions, garnishments and attachments



 a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY

AND LOCATION

STATUS OR DISPOSITION



b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns



List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION. FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships



a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT TERMS OF ASSIGNMENT OR SETTLEMENT 4



b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

#### 7. Gifts



List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT DESCRIPTION AND VALUE OF GIFT

#### 8. Losses



List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy



List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

5



#### 10. Other transfers

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED



b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S

INTEREST IN PROPERTY



#### 11. Closed financial accounts

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER,

IF ANY

#### 13. Setoffs



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person



List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor



If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight vears immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes,

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF NOTICE

**ENVIRONMENTAL** 

7

LAW



b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS NAME AND ADDRESS

DATE OF

ENVIRONMENTAL

OF GOVERNMENTAL UNIT NOTICE

LAW



 List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business



a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in

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which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

NAME

LAST FOUR DIGITS
OF SOCIAL-SECURITY
OR OTHER INDIVIDUAL
TAYBAYER LD NO

ADDRESS NATURE OF BUSINESS

BEGINNING AND ENDING DATES

8

TAXPAYER-LD, NO. (ITIN)/ COMPLETE EIN



b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)



#### 19. Books, records and financial statements

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED



b. List all firms or individuals who within two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

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c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

**ADDRESS** 



d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

9

#### 20. Inventories



a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)



b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS



#### 21. Current Partners, Officers, Directors and Shareholders

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST



b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

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22. Former partners, officers, directors and shareholders

Nog/

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL



b. If the debtor is a corporation, list all officers or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

10

23. Withdrawals from a partnership or distributions by a corporation



If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT. RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.



If the debtor is a corporation, list the name and federal taxpayer-identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER-IDENTIFICATION NUMBER (EIN)

25. Pension Funds.



If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER-IDENTIFICATION NUMBER (EIN)

\* \* \* \* \* \*

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11

[If completed by an individual or individual and sp	ouse]
I declare under penalty of perjury that I have read to affairs and any attachments thereto and that they are	he answers contained in the foregoing statement of financial e true and correct.
Date 01-04-08	Signature
Date	of Debtor Signature of Joint Debtor (if any)
[If completed on hehalf of a partnership or corporation]	
I declare under penalty of perjury that I have read the answers thereto and that they are true and correct to the best of my kno	contained in the foregoing statement of financial affairs and any attachments wledge, information and belief.
Date	Signature
	Print Name and Title
[An individual signing on behalf of a partnership or corporation	я must indicate position or relationship to debtor ]
continu	ation sheets attached
Penalty for making a false statement: Fine of up to \$500,000 to	or imprisonment for up to 5 years, or both 18 USC §§ 152 and 3571
DECLARATION AND SIGNATURE OF NON-ATTORNE	EY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)
and 342(b), and, (3) if rules or guidelines have been promulgated pursuant	and the notices and information required under 11 U.S.C. 88 110(b) 110(b)
Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	Social-Security No (Required by 11 U.S.C § 110)
If the hankruptcy petition preparer is not an individual, state the name, title responsible person, or partner who signs this document.  Address	e (if any), address, and social-security number of the officer, principal,
X	
Signature of Bankruptcy Petition Preparer	Date

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. § 156.